

PTO/SB/01 (04-05)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	DECLARATIO D	N FOR L ESIGN	JTILIT	ry or	Attorney I Number First Nam	ed Inventor		TPIPO25/W Hongming	
PATENT APPLICATION			v †		COM		F KNOWN	onen	
	(37 (FR 1.63	3)	-	Applicatio	n Number			
	Declaration		Declarati		Filing Date	9	4	129/2	005
ليكا	Submitted OR With Initial	F	Filing (su		Art Unit		111		
	Filing		(37 CFR required)	1.16 (e)))	Examiner	Name			
I here	by declare that:			-					
	nventor's residence, r	nailing add	ress. ar	nd citizenship are a	as stated b	elow next to th	neir nam	e.	
	ve the inventor(s) nan								ed and for
	a patent is sought on								
	PREFORMULATION	ON ANAL	YSIS	AND OPTIMIZ	ATION				
the sp	ecification of which			(Title of the	Invention)				
	is attached hereto								
سهد	OR								
		[·	1				
	was filed on (MM/DD	/YYYY) <u>[</u>] as Uni	ted States App —	lication	Number or Po	CT International
Applic	ation Number			and was amended	d on (MM/I	DD/YYYY)			(if applicable).
	by state that I have re				of the abo	ve identified sp	pecificati	on, including	the claims, as
	ded by any amendmen	,	•						
contin	owledge the duty to uation-in-part applicat e national or PCT inte	ions, matei	rial info	mation which bed	ame avail	able between			
I here	by claim foreign prior	ity benefits	under	35 U.S.C. 119(a))-(d) or (f),	or 365(b) of			
	or's or plant breeder's y other than the Unite								
applica	ation for patent, inventhat of the application	tor's or plar	nt breed	ler's rights certifica					
	Foreign Application		<u> </u>	Foreign Filing	Date	Priorit		Certified C	opy Attached?
	Number(s)	Coun	itry	(MM/DD/YY	YY)	Not Clain		YES	NO
									닏ㅣ
					_				
	Additional foreign	application	number	s are listed on a s	•	al priority data	sheet P	TO/SB/02B a	ttached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. PTO/SB/01 (04-05)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

correspondence to:	he address ssociated with customer Number	r. (3484	46)			OR		Correspondence address below
Name		_							
Address							_		· · · · · · · · · · · · · · · · · · ·
City		-		Sta	te				ZIP
Country		Telepho	one	_			Ema	il	1
I hereby declare that all stater and belief are believed to b statements and the like so ma false statements may jeopardi:	e true; and furt ade are punishab	ner that le by fin	these s	statemer risonme	its w	ere made v	vith t	ha ka	
NAME OF SOLE OR FIRST II	•	1	T = T						
Given Name (first and middle [[if any])		1	- pennor	nas	Family Na	me o	r Surna	ned inventor
Hongming						Che			
Inventor's Signature									Date 4/27/05
Residence: City	State			Cou	ntry			Citize	
Acton		MA	MA			USA			US
Mailing Address									
8 Sawmill Road									
City	State		044		Zip				Country
Acton	M.A		MA		L	0172	20		USA
NAME OF SECOND INVENTO					A	petition has	beer	n filed f	or this unsigned inventor
Given Name (first and middle [if any])					Family Nam			
Hector						Guzm	an		
Inventor's Signature									Date
Residence: City	State			Cour	ntry			Citizer	nship
<u>Jamaica Plain</u>	MA	· •	MA		U	SA		U	S
Mailing Address					-				
47 Wyman Street									
City	State				Zip		$\neg \tau$	Countr	у
Jamaica Plain	MA	.				02130		Į	JSA
Additional inventors or a legal re	presentative are being	named or	n the 1	Sin	oplem	ental sheet(s) D		/024 or 0	02I R attached hereto

PTO/SB/01 (04-05)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

correspondence to:	ne address ssociated with ustomer Number:	34846			OR [Correspondence address below	
Name							
Address							
City			State			ZIP	
Country	Telepho	one	<u> </u>		Email		
I hereby declare that all staten and belief are believed to be statements and the like so man false statements may jeopardiz	e true, and further that de are punishable by fine	tnese stat	ements v	vere made '	with the	knowladge that willful false	
NAME OF SOLE OR FIRST IN	IVENTOR:	☐ A D	etition has	s been filed f	or this ur	osigned inventor	
Given Name (first and middle [i	f any])	<u> </u>		ition has been filed for this unsigned inventor Family Name or Surname			
Hongming				Che	en	~	
Inventor's Signature						Date	
Residence: City	State		Country		Ci	tizenship	
Acton	MA			USA		US	
Mailing Address						<u> </u>	
8 Sawmill Road							
City	State		Zi	p		Country	
Acton	MA		01720			USA	
NAME OF SECOND INVENTO	R:			A petition has	s been fil	ed for this unsigned inventor	
Given Name (first and middle [it	fany])	·		Family Nam			
Hector			j	Guzn			
Inventor's Signature						Date /	
Residence: City	[O: 1					Date 4/26/05	
			Country		Cit	izenship	
Jamaica Plain MA MA USA Mailing Address						US	
•				•			
47 Wyman Street	01.1					<u> </u>	
City	State		Zip		Co	untry	
Jamaica Plain	MA			02130		USA	
X Additional inventors or a legal rep	resentative are being named on	the 1	sunnlen	nental sheet/s) F	TO/SB/02/	or 021 Plattached horsets	

PTO/SB/02A (09-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

ADDITIONAL INVENTOR(S)

DECLARATION		Supplemental	Sheet 	Page Z of Z
Name of Additional Joint Inventor, if an	y:	A petition	n has been filed for this u	nsigned inventor
Given Name (first and middle (if any))	Family Name or	r Sumame	
Colin R. ⊃		Gardn	ier	
Inventor's Signature	<i></i>			25 Apr 05
Concord Residence: City	MA State	MA co	USA	US Citizenship
140 Caterina Heights Mailing Address	•		_	
City Concord	State	MA	Zip 01742	Country USA
Name of Additional Joint Inventor, if any	y:	A petition	has been filed for this u	nsigned inventor
Given Name (first and middle (if any))		Family Name or S	urname
				,
Inventor's Signature				Date
Residence: City	State		Country	Citizenship
Mailing Address				-
City	State		Zip	Country
Name of Additional Joint Inventor, if any	y:	A petition	has been filed for this u	nsigned inventor
Given Name (first and middle (if any))			Family Name or Su	ımame
Inventor's Signature			_	Date
Residence: City	State		Country	Citizenship
Mailing Address				
Intaining Address			<u> </u>	1
City	Ctoto		7:-	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file cand by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Rec'd PCT/PTO 29 APR 2005

PTO/SB/81 (04-05)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it disclaims a united AVE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	mation unless it displays a valid OMB control number.
Filing Date	4/29/05
First Named Inventor	Hongming Chen
Title	Preformulation Analysis.
Art Unit	
Examiner Name	
Attorney Docket Number	TPTP025/WO IIS

I hereby revoke all previous powers of attorney given in the above-identified application.							
I hereby appoint:	in the above-ide	enuneu applica	auon.				
Thereby appoint.	· · · · · · · · · · · · · · · · · · ·						
X Practitioners associated with the Customer Number:	34846						
OR		- · · · <u>- · · · · · · · · · · · · · · · </u>					
Practitioner(s) named below:							
Name	Name Registration Number						
·							
as my/our attorney(s) or agent(s) to prosecute the application in Trademark Office connected therewith.	dentified above, and to t	ransact all busine	ss in the United States Patent and				
Please recognize or change the correspondence address for the	o above identified and	4:4					
Please recognize or change the correspondence address for the	ie above-identified appli	cation to:	•				
The address associated with the above-mentioned Cu OR	ustomer Number:						
The address associated with Customer Number:							
OR L							
Individual Name							
Address							
City	State		Zip				
Country	i						
Telephone	Email						
am the: X Applicant/Inventor							
Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR:							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
	pplicant or Assignee	of Record	7				
Signature Stohn Robinson			Date 25 APIL 05				
Name Colin R. Gardner			elephone 781-674-7887				
	Transform Pharm		<u> </u>				
NOTE: Signatures of all the inventors or assignees of record of the entire signature is required, see below.	interest or their represents	ative(s) are required.	Submit multiple forms if more than one				
*Total of3 forms are submitted.							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (04-05)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of information unless it displays a valid OMB paster with the collection of the collection of information unless it displays a valid OMB paster with the collection of the c

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	mation unless it displays a valid OMB control number.
Filing Date	4/29/05
First Named Inventor	Hongming Chen
Title	Preformulation Analysis.
Art Unit	
Examiner Name	
Attorney Docket Number	TPTPO25/WO IIS

I hereby revoke all previous powers of attorney give	en in the above-identified application.					
I hereby appoint:						
X Practitioners associated with the Customer Number:	34846					
Practitioner(s) named below:						
. Name	Registration Number					
as my/our attorney(s) or agent(s) to prosecute the application ide Trademark Office connected therewith.	entified above, and to transact all business in the United States Patent and					
Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number:						
OR						
The address associated with Customer Number:						
Firm or Individual Name						
Address						
Cit.						
City Country	State Zip					
Telephone	Email					
l am the:						
X Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature As T	Date 4/26/05					
Name Hector Guzman	Telephone 78/674.7882					
Title and Company Sr. Scientist						
NOTE: Signatures of all the inventors or assignees of record of the entire ir signature is required, see below*.	interest or their representative(s) are required. Submit multiple forms if more than one					
*Total of forms are submitted.	·					

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (04-05)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	mation unless it displays a valid OMB control number.
Filing Date	4/29/05
First Named Inventor	Hongming Chen
Title	Preformulation Analysis.
Art Unit	
Examiner Name	
Attorney Docket Number	TPTP025/WO US

I hereby revoke al	I previous powers of attorney g	iven in the at	oove-identified applic	cation.				
I hereby appoint:								
	sociated with the Customer Number:	34846						
Practitioner(s) n	amed below:							
	Name Registration Number							
as my/our attorney(s) of Trademark Office conn	or agent(s) to prosecute the application lected therewith.	identified above	e, and to transact all busin	ness in the United States Patent and				
Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR								
The address associated with Customer Number: OR Firm or Individual Name								
Address								
City			State	Zip				
Country Telephone			Email					
Telephone I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature				Date 4/27/05				
Name Title and Company	Hongming Chen			Telephone				
NOTE: Signatures of all the signature is required, see I	e inventors or assignees of record of the enti- below*.	ire interest or their	representative(s) are require	ed. Submit multiple forms if more than one				
Total of 3	forms are submitted.							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.